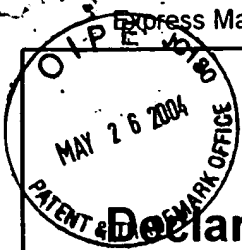


Docket No.

10857.369



Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
GELDANAMYCIN-PRODUCING STRAINS, USES THEREOF AND METHODS OF PRODUCING SAME

the specification of which

(check one)

☒ is attached hereto.

☐ was filed on _____ as United States Application No. or PCT International Application Number _____ and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

N/A

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

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(Filing Date)

(Application Serial No.)

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(Filing Date)

(Status)
(patented, pending, abandoned)

(Application Serial No.)

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(Status)
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(Filing Date)

(Status)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Dubuc, Jean H. Reg. No. 26,374

Leclerc, Alain M. Reg. No. 37,036

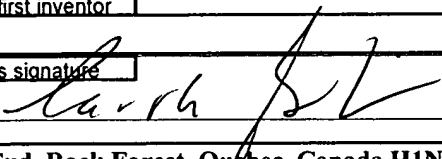
Gauvreau, Julie, Reg. No. 52,532

Sofia, Michel Reg. No. 37,017

Send Correspondence to:

Julie Gauvreau, (514) 397-4374

Direct Telephone Calls to: *(name and telephone number)*

Full name of sole or first inventor	Carole Beaulieu	
Sole or first inventor's signature		Date April 2, 2004
Residence	185, Saint-Rock Sud, Rock Forest, Québec, Canada H1N 2T5	
Citizenship	Canadian	
Post Office Address	185, Saint-Rock Sud, Rock Forest, Québec, Canada H1N 2T5	

Full name of second inventor, if any	Julie Beauséjour	
Second inventor's signature		Date
Residence	31 des Mélézes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	
Citizenship	Canadian	
Post Office Address	31 des Mélézes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	

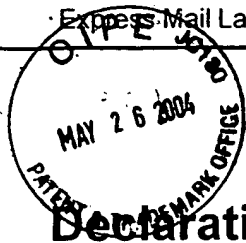
Full name of third inventor, if any	
Sonya Agbessi	
Third inventor's signature	Date
Residence	
5765 chemin Hudson app. 7, Montréal, Québec, Canada H3S 2G4	
Citizenship	
Canadian	
Post Office Address	
5765 chemin Hudson app. 7, Montréal, Québec, Canada H3S 2G4	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

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Sofia, Michel Reg. No. 37,017

Send Correspondence to:

Julie Gauvreau, (514) 397-4374

Direct Telephone Calls to: *(name and telephone number)*

Full name of sole or first inventor	
Carole Beaulieu	
Sole or first inventor's signature	Date
Residence	
185, Saint-Rock Sud, Rock Forest, Quebec, Canada H1N 2T5	
Citizenship	
Canadian	
Post Office Address	
185, Saint-Rock Sud, Rock Forest, Quebec, Canada H1N 2T5	

Full name of second inventor, if any	
Julie Beauséjour	
Second inventor's signature	Date
<i>Julie Beauséjour</i>	05 mai 2004
Residence	
31 des Mélèzes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	
Citizenship	
Canadian	
Post Office Address	
31 des Mélèzes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	

Full name of third inventor, if any	
Sonya Agbessi	
Third inventor's signature	Date
Residence	
5765 chemin Hudson app. 7, Montréal, Québec, Canada H3S 2G4	
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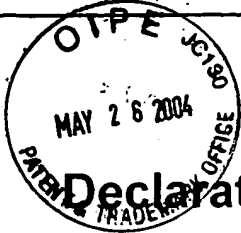
Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

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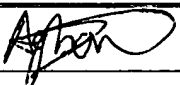
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Julie Gauvreau, (514) 397-4374

Direct Telephone Calls to: *(name and telephone number)*

Full name of sole or first inventor	
Carole Beaulieu	
Sole or first inventor's signature	Date
Residence	
185, Saint-Rock Sud, Rock Forest, Quebec, Canada H1N 2T5	
Citizenship	
Canadian	
Post Office Address	
185, Saint-Rock Sud, Rock Forest, Quebec, Canada H1N 2T5	

Full name of second inventor, if any	
Julie Beauséjour	
Second inventor's signature	Date
Residence	
31 des Mélézes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	
Citizenship	
Canadian	
Post Office Address	
31 des Mélézes, St-Étienne de Lauzon, Québec, Canada G6J 1W3	

Full name of third inventor, if any	
Sonya Agbessi	
Third inventor's signature	Date
	May 18, 2014
Residence	
5765 chemin Hudson app. 7, Montréal, Québec, Canada H3S 2G4	
Citizenship	
Canadian	
Post Office Address	
5765 chemin Hudson app. 7, Montréal, Québec, Canada H3S 2G4	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	